

NEIGHBORHOOD ASSISTANCE PROGRAM PROJECT UPDATE FORM

ORGANIZATION NAME	NAP PROJECT NUMBER
ADDRESS	
PHONE	FAX
EMAIL ADDRESS	INCLUDE ON LIST SERVE?
	☐ YES ☐ NO
WEBSITE ADDRESS	
LIST ANY CHANGES IN YOUR BOARD MEMBERS BELOW	
LIST ANY CHANGES IN YOUR PROJECT STAFF BELOW	

Note: If new staff will be signing paperwork for your organization, you will need to revise the signature authorization form contained in your contract. Please contact NAP staff to obtain a new signature authorization form.

Upon completion, please mail or fax this form to:

Neighborhood Assistance Program

Attn: Joyce Nichols

P.O. Box 118

Jefferson City, MO 65102 Phone: 573-751-4539 Fax: 573-522-4322



Building Communities Through Partnerships